

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

**ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY**



W-02821A  
Double R Water Distributors, Inc.  
116 Lake Havasu Avenue South, Suite 103  
Lake Havasu City AZ 86403

RECEIVED

ACC UTILITIES DIRECTOR

**ANNUAL REPORT**  
**Water**

**FOR YEAR ENDING**

12	31	2009
----	----	------

FOR COMMISSION USE

ANN 04	09
--------	----

4-12-10

## COMPANY INFORMATION

**Company Name (Business Name)** DOUBLE R WATER DISTRIBUTORS, INC.

**Mailing Address** 116 LAKE HAVASU AVE S, SUITE 103

(Street)

LAKE HAVASU CITY

AZ

86403

(City)

(State)

(Zip)

(928) 854-8800

(928) 854-8811

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Email Address** DOUBLER@CITLINK.NET

**Local Office Mailing Address** SAME AS ABOVE

(Street)

(City)

(State)

(Zip)

Local Office Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Email Address** \_\_\_\_\_

## MANAGEMENT INFORMATION

☐ **Regulatory Contact:**

☒ **Management Contact:** TODD R. BREMNER

PRESIDENT

(Name)

(Title)

116 LAKE HAVASU AVE S, SUITE 103

LAKE HAVASU CITY

AZ

86403

(Street)

(City)

(State)

(Zip)

(928) 854-8800

(928) 854-8811

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Email Address** DOUBLER@CITLINK.NET

**On Site Manager:** TODD R. BREMNER

(Name)

116 LAKE HAVASU AVE S, SUITE 103

LAKE HAVASU CITY

AZ

86403

(Street)

(City)

(State)

(Zip)

(928) 854-8800

(928) 854-8811

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Email Address** DOUBLER@CITLINK.NET

**Statutory Agent:** TODD R. BREMNER

(Name)

116 LAKE HAVASU AVE S, SUITE 103

LAKE HAVASU CITY

AZ

86403

(Street)

(City)

(State)

(Zip)

(928) 854-8800

(928) 854-8811

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Attorney:** FENNEMORE CRAIG, P.C.

(Name)

3003 N CENTRAL AVE, SUITE 2600

PHOENIX

AZ

85012

(Street)

(City)

(State)

(Zip)

(602) 916-5366

(602) 916-5566

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Email Address**

### OWNERSHIP INFORMATION

Check the following box that applies to your company:

☐ Sole Proprietor (S)

☒ C Corporation (C) (Other than Association/Co-op)

☐ Partnership (P)

☐ Subchapter S Corporation (Z)

☐ Bankruptcy (B)

☐ Association/Co-op (A)

☐ Receivership (R)

☐ Limited Liability Company

☐ Other (Describe) \_\_\_\_\_

### COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

☐ APACHE

☐ COCHISE

☐ COCONINO

☐ GILA

☐ GRAHAM

☐ GREENLEE

☐ LA PAZ

☐ MARICOPA

☒ MOHAVE

☐ NAVAJO

☐ PIMA

☐ PINAL

☐ SANTA CRUZ

☐ YAVAPAI

☐ YUMA

☐ STATEWIDE

**COMPANY NAME**

DOUBLE R WATER DISTRIBUTORS, INC.

**UTILITY PLANT IN SERVICE**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (OC)</b>	<b>Accumulated Depreciation (AD)</b>	<b>O.C.L.D. (OC less AD)</b>
301	Organization	45	- 0 -	45
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	64,812	2,881	61,931
307	Wells and Springs	3,509	156	3,353
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	98	3	95
331	Transmission and Distribution Mains	1,184	32	1,152
333	Services			
334	Meters and Meter Installations	1,983	220	1,763
335	Hydrants			
336	Backflow Prevention Devices	5,900	517	5,383
339	Other Plant and Misc. Equipment	3,288	292	2,996
340	Office Furniture and Equipment	5,232	466	4,766
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment	5,309	356	4,953
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	91,360	4,923	86,437

This amount goes on the Balance Sheet Acct. No. 108

**COMPANY NAME**

DOUBLE R WATER DISTRIBUTORS, INC.

**CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization	45	-0-	-0-
302	Franchises			
303	Land and Land Rights	64,812	3.33%	2,161
304	Structures and Improvements	3,509	3.33%	117
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	98	2.0%	2
331	Transmission and Distribution Mains	1,184	2.0%	24
333	Services			
334	Meters and Meter Installations	1,983	8.3%	165
335	Hydrants			
336	Backflow Prevention Devices	5,900	6.6%	388
339	Other Plant and Misc. Equipment	3,288	6.7%	219
340	Office Furniture and Equipment	5,232	6.7%	349
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment	5,309	5.0%	267
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	91,360		3,692

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_  
 Acct. No. 403.

<b>COMPANY NAME</b>	DOUBLE R WATER DISTRIBUTORS, INC.
---------------------	-----------------------------------

### **BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>ASSETS</b>		
	<b>CURRENT AND ACCRUED ASSETS</b>		
131	Cash	\$ 506	\$ 1,161
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	<b>TOTAL CURRENT AND ACCRUED ASSETS</b>	\$ 506	\$ 1,161
	<b>FIXED ASSETS</b>		
101	Utility Plant in Service	\$ 91,360	\$ 91,360
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	(1,231)	(4,923)
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	<b>TOTAL FIXED ASSETS</b>	\$ 90,129	\$ 86,437
	<b>TOTAL ASSETS</b>	\$ 90,635	\$ 87,598

**NOTE:** The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

**BALANCE SHEET (CONTINUED)**

<b>Acct. No.</b>		<b>BALANCE AT BEGINNING OF YEAR</b>	<b>BALANCE AT END OF YEAR</b>
	<b>LIABILITIES</b>		
	<b>CURRENT LIABILITES</b>		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies	1,500	3,541
235	Customer Deposits		
236	Accrued Taxes	27	27
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	<b>TOTAL CURRENT LIABILITIES</b>	\$ align="right">1,527	\$ align="right">3,568
	<b>LONG-TERM DEBT (Over 12 Months)</b>		
224	Long-Term Notes and Bonds	\$ align="right">95,006	\$ align="right">95,006
	<b>DEFERRED CREDITS</b>		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	<b>TOTAL DEFERRED CREDITS</b>	\$	\$
	<b>TOTAL LIABILITIES</b>	\$ align="right">96,533	\$ align="right">98,574
	<b>CAPITAL ACCOUNTS</b>		
201	Common Stock Issued	\$ align="right">1,000	\$ align="right">1,000
211	Paid in Capital in Excess of Par Value	1,500	1,500
215	Retained Earnings	(8,398)	(13,276)
218	Proprietary Capital (Sole Props and Partnerships)		
	<b>TOTAL CAPITAL</b>	\$ align="right">(5,898)	\$ align="right">(10,976)
	<b>TOTAL LIABILITIES AND CAPITAL</b>	\$ align="right">90,365	\$ align="right">87,598

**COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

<b>Acct. No.</b>	<b>OPERATING REVENUES</b>	<b>PRIOR YEAR</b>	<b>CURRENT YEAR</b>
461	Metered Water Revenue	\$ 2,277	\$ 6,604
460	Unmetered Water Revenue		
474	Other Water Revenues		1,509
	<b>TOTAL REVENUES</b>	\$ 2,277	\$ 8,113
	<b>OPERATING EXPENSES</b>		
601	Salaries and Wages	\$	\$
610	Purchased Water	11,308	
615	Purchased Power		
618	Chemicals		
620	Repairs and Maintenance	505	
621	Office Supplies and Expense		
630	Outside Services	4,010	9,021
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		595
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case	45	
675	Miscellaneous Expense	367	
403	Depreciation Expense	1,231	3,692
408	Taxes Other Than Income		
408.11	Property Taxes	126	
409	Income Tax		257
	<b>TOTAL OPERATING EXPENSES</b>	\$ 17,592	\$ 13,566
	<b>OPERATING INCOME/(LOSS)</b>	\$ (15,316)	\$ (5,453)
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income	\$ 21	\$
421	Non-Utility Income	13,421	375
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>	\$ 13,442	\$ 375
	<b>NET INCOME/(LOSS)</b>	\$ (1,874)	\$ (5,078)



**COMPANY NAME** DOUBLE R WATER DISTRIBUTORS, INC.

## **SUPPLEMENTAL FINANCIAL DATA**

### **Long-Term Debt**

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End \$

Meter Deposits Refunded During the Test Year	\$	
--	----	--

<b>COMPANY NAME</b>	DOUBLE R WATER DISTRIBUTORS, INC.		
<b>Name of System:</b>	PARADISE TRAILS	<b>ADEQ Public Water System Number:</b>	AZ0408178

## WATER COMPANY PLANT DESCRIPTION

### WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55536616	10	63	550	5"	2"	1992
55212622	60	354	980	8-5/8"	3"	2007

\* Arizona Department of Water Resources Identification Number

### OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
25	2	25	
100	1		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
253,402 GAL	1		
559,769 GAL	1		
18,998 GAL	1		

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME</b>	DOUBLE R WATER DISTRIBUTORS, INC.		
<b>Name of System:</b>	PARADISE TRAILS	<b>ADEQ Public Water System Number:</b>	AZ0408178

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

**MAINS**

Size (in inches)	Material	Length (in feet)
2		
3		
4	PVC C900	10,876
5		
6	PVC C900	12,367
8	PVC C900	10,854
10	PVC C900	1,982
12	PVC C900	215
4	DIP CL350	600
6	DIP CL350	654
8	DIP CL350	200

**CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X 3/4	27
3/4	
1	1
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

**For the following three items, list the utility owned assets in each category for each system.**

**TREATMENT EQUIPMENT:**

---

---

---

---

---

---

---

---

**STRUCTURES:**

---

---

---

---

---

---

---

---

**OTHER:**

40' STEEL CARGO CONTAINER

---

---

---

---

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME:</b> DOUBLE R WATER DISTRIBUTORS, INC.	
<b>Name of System:</b> PARADISE TRAILS	<b>ADEQ Public Water System Number:</b> AZ0408178

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	24	71,910	72,060	
FEBRUARY	24	105,190	105,490	
MARCH	24	120,841	121,541	
APRIL	20	75,670	76,620	
MAY	23	124,860	432,260	
JUNE	21	137,633	152,633	
JULY	25	209,744	214,294	
AUGUST	25	425,338	429,888	
SEPTEMBER	27	242,233	246,533	
OCTOBER	27	62,172	66,272	
NOVEMBER	27	169,778	174,628	
DECEMBER	27	651,378	655,278	
<b>TOTALS →</b>		2,396,747	2,747,497	

0.0047 MG/l 55212622

What is the level of arsenic for each well on your system? 0.0045 mg/l 55536616  
*(If more than one well, please list each separately.)*

If system has fire hydrants, what is the fire flow requirement? 1500GPM for 2 hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?  
☐ Yes                      ☐ No

Is the Water Utility located in an ADWR Active Management Area (AMA)?  
☐ Yes                      ☒ No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  
☐ Yes                      ☒ No

If yes, provide the GPCPD amount: N/A

***Note: If you are filing for more than one system, please provide separate data sheets for each system.***

<b>COMPANY NAME:</b> DOUBLE R WATER DISTRIBUTORS, INC.	
<b>Name of System:</b> PARADISE TRAILS	<b>ADEQ Public Water System Number:</b> AZ0408178

**UTILITY SHUTOFFS / DISCONNECTS**

MONTH		Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
<b>TOTALS →</b>				

OTHER (description):

---

---

---

---

---

---

---

COMPANY NAME DOUBLE R WATER DISTRIBUTORS, INC.

YEAR ENDING 12/31/2009

**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2009 was: \$ 151.28

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. \_\_\_\_\_

---

---

---

---

PARCEL IDENTIFICATION	ROLL NUMBER	TAX AREA CODE	SITUS ADDRESS
90410400	0000000	400	

**VERIFICATION  
AND  
SWORN STATEMENT**  
Taxes

RECEIVED  
APR 1 2010  
ACC UTILITIES

**VERIFICATION**

STATE OF ARIZONA  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME) MOHAVE
NAME (OWNER OR OFFICIAL) TITLE TODD R BREMNER, PRESIDENT
COMPANY NAME DOUBLE R WATER DISTRIBUTORS, INC.

**DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION**

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.



SIGNATURE OF OWNER OR OFFICIAL

(928) 854-8800

TELEPHONE NUMBER


SUBSCRIBED AND SWORN TO BEFORE ME

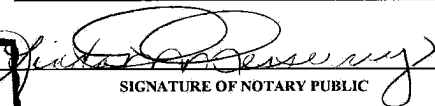
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 1ST DAY OF

COUNTY NAME MOHAVE	
MONTH APRIL	.20 <u>10</u>

(SEAL)  
MY COMMISSION

 **LINDA M MESSERVY**  
Notary Public, State of Arizona  
Mohave County  
My Commission Expires  
April 01, 2010

  
SIGNATURE OF NOTARY PUBLIC



COMPANY NAME DOUBLE R WATER DISTRIBUTORS, INC.

YEAR ENDING 12/31/2009

**INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported	<u>- 0 -</u>
Estimated or Actual Federal Tax Liability	<u>- 0 -</u>

State Taxable Income Reported	<u>- 0 -</u>
Estimated or Actual State Tax Liability	<u>- 0 -</u>

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances	<u>- 0 -</u>
Amount of Gross-Up Tax Collected	<u>- 0 -</u>
Total Grossed-Up Contributions/Advances	<u>- 0 -</u>

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

  
SIGNATURE

4/1/10  
DATE

TODD R BREMNER  
PRINTED NAME

PRESIDENT  
TITLE

**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

RECEIVED  
ACC UTILITIES

**VERIFICATION**

**STATE OF** ARIZONA

**I, THE UNDERSIGNED**

**OF THE**

COUNTY OF (COUNTY NAME) MOHAVE
NAME (OWNER OR OFFICIAL) TITLE TODD R BREMNER, PRESIDENT
COMPANY NAME DOUBLE R WATER DISTRIBUTORS, INC.

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2009 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 8,113

(THE AMOUNT IN BOX ABOVE  
INCLUDES \$ -0-  
IN SALES TAXES BILLED, OR COLLECTED)

**\*\*REVENUE REPORTED ON THIS PAGE MUST  
INCLUDE SALES TAXES BILLED OR  
COLLECTED. IF FOR ANY OTHER REASON,  
THE REVENUE REPORTED ABOVE DOES NOT  
AGREE WITH TOTAL OPERATING REVENUES  
ELSEWHERE REPORTED, ATTACH THOSE  
STATEMENTS THAT RECONCILE THE  
DIFFERENCE. (EXPLAIN IN DETAIL)**

  
SIGNATURE OF OWNER OR OFFICIAL  
928-854-8800  
TELEPHONE NUMBER

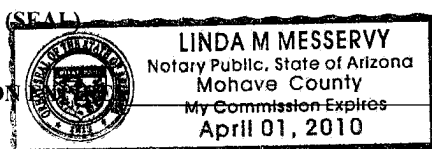
SUBSCRIBED AND SWORN TO BEFORE ME

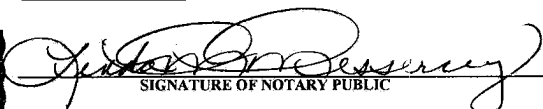
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 1ST DAY OF

COUNTY NAME MOHAVE	
MONTH APRIL	<u>20</u> 10

MY COMMISSION



  
SIGNATURE OF NOTARY PUBLIC

**VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE**  
Intrastate Revenues Only

RECEIVED  
APR 1 2010  
ACC UTILITIES DIRECTOR

**VERIFICATION**

**STATE OF ARIZONA**

**I, THE UNDERSIGNED**

**OF THE**

COUNTY OF (COUNTY NAME) MOHAVE	
NAME (OWNER OR OFFICIAL) TODD R BREMNER	TITLE PRESIDENT
COMPANY NAME DOUBLE R WATER DISTRIBUTORS, INC.	

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2009 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 8,113

THE AMOUNT IN BOX AT LEFT

INCLUDES \$ -0-

IN SALES TAXES BILLED, OR COLLECTED)

**\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.**

  
SIGNATURE OF OWNER OR OFFICIAL

928-854-8800

TELEPHONE NUMBER

**SUBSCRIBED AND SWORN TO BEFORE ME**

**A NOTARY PUBLIC IN AND FOR THE COUNTY OF**

**THIS**

1ST

**DAY OF**

NOTARY PUBLIC NAME  
LINDA M MESSERVY

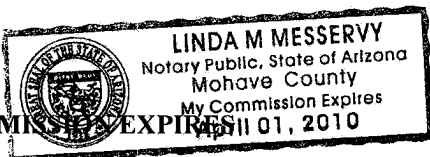
COUNTY NAME  
MOHAVE

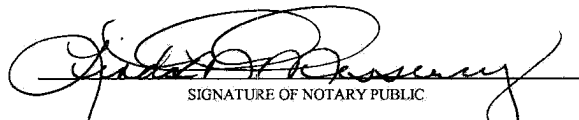
MONTH APRIL

20 10

(SEAL)

MY COMMISSION EXPIRES



  
SIGNATURE OF NOTARY PUBLIC